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APPLICANTS Chang-Lien Wu, Tai-Chung City, TAIWAN; Chih-Ching Wang, Tai-Chung Hsien, TAIWAN;				
** CONTINUING DATA ***** MM				
** FOREIGN APPLICATIONS ***** MM				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/13/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Michael [Signature]</i> Allowance Examiner's Signature Initials		STATE OR COUNTRY TAIWAN	SHEETS DRAWING 6	TOTAL CLAIMS 23
				INDEPENDENT CLAIMS 2
ADDRESS 027765				
TITLE METHOD AND APPARATUS FOR PROVIDING FAULT TOLERANCE TO MEMORY				
FILING FEE RECEIVED 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	